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### APPLICANTS

Robert R. Bly, Wellington, OH;

### \*\* CONTINUING DATA \*\*\*\*\*

*None, R.R.*

### \*\* FOREIGN APPLICATIONS \*\*\*\*\*

*None, R.R.*

### IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY OH	SHEETS DRAWING 9	TOTAL CLAIMS 1	INDEPENDENT CLAIMS 1
Verified and Acknowledged Examiner's Signature	Initials				

### ADDRESS

24024  
CALFEE HALTER & GRISWOLD, LLP  
800 SUPERIOR AVENUE  
SUITE 1400  
CLEVELAND, OH  
44114

### TITLE

Commode safety frame

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